

# Physical Environment Safety Checklist

1<sup>st</sup> Date: \_\_\_\_\_ 2nd Date: \_\_\_\_\_ 3rd Date: \_\_\_\_\_ 4th Date: \_\_\_\_\_

## GENERAL

| DESCRIPTION  | 1 <sup>st</sup> | 2 <sup>n</sup> | 3 <sup>rd</sup> | 4 <sup>th</sup> |
|--|-----------------|----------------|-----------------|-----------------|
| Home is accessible   |                 |                |                 |                 |
| Free of holes in walls   |                 |                |                 |                 |
| Exits are free of debris   |                 |                |                 |                 |
| Furnace is free of debris  |                 |                |                 |                 |
| Free of tripping hazards (carpets secured, rugs don't slide, thresh holds secured, etc.) |                 |                |                 |                 |
| No open sockets  |                 |                |                 |                 |
| Fire extinguishers registered full   |                 |                |                 |                 |
| Smoke detectors in working order   |                 |                |                 |                 |
| Lamps and lights have bulbs and are in working order                                     |                 |                |                 |                 |
| No exposed or frayed wires   |                 |                |                 |                 |
| Closets have doors   |                 |                |                 |                 |
| Hot water at temperature as to not burn someone  |                 |                |                 |                 |
| First aid kit in home  |                 |                |                 |                 |
| Home steps, deck, outside fixtures in good repair  |                 |                |                 |                 |

## KITCHEN

| DESCRIPTION  | 1 <sup>st</sup> | 2 <sup>n</sup> | 3 <sup>rd</sup> | 4 <sup>th</sup> |
|--|-----------------|----------------|-----------------|-----------------|
| Refrigerator and freezer in working order and free of mildew           |                 |                |                 |                 |
| Fridge/freezer contains adequate amount of food, and food is unspoiled |                 |                |                 |                 |
| Stove burner and oven in working order                                 |                 |                |                 |                 |
| Dishwasher free of mold and mildew                                     |                 |                |                 |                 |
| Cabinets have adequate food supply                                     |                 |                |                 |                 |

## LIVING AREA

| DESCRIPTION                    | 1 <sup>st</sup> | 2 <sup>n</sup> | 3 <sup>rd</sup> | 4 <sup>th</sup> |
|--------------------------------|-----------------|----------------|-----------------|-----------------|
| See general and meets criteria |                 |                |                 |                 |

## BEDROOM

| DESCRIPTION   | 1 <sup>st</sup> | 2 <sup>n</sup> | 3 <sup>rd</sup> | 4 <sup>th</sup> |
|---|-----------------|----------------|-----------------|-----------------|
| Personalized (pictures, bedspread, decorations, etc.) |                 |                |                 |                 |
| Personalized items (TV, VCR, books, radio, etc.)      |                 |                |                 |                 |
| Adequate space for clothing storage                   |                 |                |                 |                 |
| Clean sheets  |                 |                |                 |                 |
| Free of old food, other hazardous items               |                 |                |                 |                 |

## BATHROOM

| DESCRIPTION                                     | 1 <sup>st</sup> | 2 <sup>n</sup> | 3 <sup>rd</sup> | 4 <sup>th</sup> |
|---|-----------------|----------------|-----------------|-----------------|
| Tub and/or shower free from mold and mildew     |                 |                |                 |                 |
| Shampoo available                               |                 |                |                 |                 |
| Soap  |                 |                |                 |                 |
| Hand towels                                     |                 |                |                 |                 |
| Toilet paper                                    |                 |                |                 |                 |
| Adequate # of towels for persons living in home |                 |                |                 |                 |
| No health risk due to uncleanness               |                 |                |                 |                 |

## COMMENTS

|                              |              |
|------------------------------|--------------|
| <b>1<sup>st</sup> Check:</b> |              |
|                              |              |
|                              |              |
| <b>Agency Signature:</b>     | <b>Date:</b> |
| <b>Regional Center:</b>      | <b>Date:</b> |
| <b>2<sup>nd</sup> Check:</b> |              |
|                              |              |
|                              |              |
| <b>Agency Signature:</b>     | <b>Date:</b> |
| <b>Regional Center:</b>      | <b>Date:</b> |
| <b>3<sup>rd</sup> Check:</b> |              |
|                              |              |
|                              |              |
| <b>Agency Signature:</b>     | <b>Date:</b> |
| <b>Regional Center:</b>      | <b>Date:</b> |
| <b>4<sup>th</sup> Check:</b> |              |
|                              |              |
|                              |              |
| <b>Agency Signature:</b>     | <b>Date:</b> |
| <b>Regional Center:</b>      | <b>Date:</b> |